

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MAGA COALITION, INC.

ADDRESS (number and street)

1001 Brickell Bay Drive

Ste 2700

Check if different
than previously
reported. (ACC)

Miami

FL

33131

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00654343

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

in the
State of

M M / D D / Y Y Y Y Y Y

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

in the
State of

M M / D D / Y Y Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y Y Y
04 01 2018

through

M M / D D / Y Y Y Y Y Y
06 30 2018M M / D D / Y Y Y Y Y Y
06 30 2018M M / D D / Y Y Y Y Y Y
06 30 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hassine, Brian, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Hassine, Brian, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 15 2018M M / D D / Y Y Y Y Y Y
10 15 2018M M / D D / Y Y Y Y Y Y
10 15 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MAGA COALITION, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MAGA COALITION, INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2018

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2018

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

82895.00

92320.00

(ii) Unitemized

7656.88

14117.76

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

90551.88

106437.76

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

90551.88

106437.76

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

113.16

113.16

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

90665.04

106550.92

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

90665.04

106550.92

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	59508.63	92055.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	59508.63	92055.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	59508.63	92055.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59508.63	92055.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	90551.88	106437.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	90551.88	106437.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	59508.63	92055.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	113.16	113.16
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	59395.47	91942.22

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5 HCB

Form/Schedule: F3XA

Transaction ID :

This amendment is in response to the letter dated September 16, 2018 requesting additional information on the 2018 July quarterly report. We have fixed the error that created an incorrect beginning cash on hand. While doing this, the Committee reviewed its accounts and have updated the itemized donor information on this report to provide additional employer and occupation information collected since the original report was filed. The committee also noted a few duplicate entries in the disbursements and a few entries that had inadvertently been missed. Finally the committee has made sure that all unitemized receipts are now included on line 11a(ii), instead as a combined entry that was itemized and included on line 11a(i).

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Alger, Mary, , ,

Mailing Address 112 Clyburn St.

City

Marco Island

State

FL

Zip Code

34145

 FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2018

Transaction ID : SA11AI.5984

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barnard, Daniel, , ,

Mailing Address P.O. Box 15519

City

Newport News

State

VA

Zip Code

23608

 FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Financial Advisor

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : SA11AI.5743

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beang, Nancy, , ,

Mailing Address 5123 Massachusetts Ave, NW

City

Washington

State

DC

Zip Code

20016

 FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2018

Transaction ID : SA11AI.5725

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beang, Nancy, , ,

Mailing Address 5123 Massachusetts Ave, NW

City
Washington

State
DC

Zip Code
20016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5726

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bernal, Raul, , ,

Mailing Address 801 South Olive Avenue

City

West Palm Beach

State

FL

Zip Code

33401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

B.V.E.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5744

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Brandt, Ramona, , ,

Mailing Address PO Box 340

City

Oakton

State

VA

Zip Code

22124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

REMAX

Occupation (for Individual)

Real Estate Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11AI.5794

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City
Cortez

State
CO

Zip Code
81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA11AI.5653

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City
Cortez

State
CO

Zip Code
81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5670

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City
Cortez

State
CO

Zip Code
81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City

Cortez

State

CO

Zip Code

81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

05 / 21 / 2018

Transaction ID : SA11AI.5641

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City

Cortez

State

CO

Zip Code

81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA11AI.6000

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City

Cortez

State

CO

Zip Code

81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 21 / 2018

Transaction ID : SA11AI.5644

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bugg, Kathi, , ,

Mailing Address 1418 Aldridge Road

City
Cortez

State
CO

Zip Code
81321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Janitorial Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

06 / 23 / 2018

Transaction ID : SA11AI.6048

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burkett, Tom, , ,

Mailing Address 11928 Royce Waterford Circle

City
Tampe

State
FL

Zip Code
33626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Burkett Asset Management

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA11AI.5829

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cannon, Kimberly, , ,

Mailing Address 3736 1st Avenue

City
Edgewater

State
MD

Zip Code
21037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 02 / 2018

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1520.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chaffee, Amy, , ,

Mailing Address 2385 Stoakley Rd

City

Prince Frederick

State

MD

Zip Code

20678

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Construct Corp

Occupation (for Individual)

Site Superintendent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA11AI.5835

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Chaffee, Chris, , ,

Mailing Address 2385 Stoakley Road

City

Prince Fredrick

State

MD

Zip Code

20678

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Castle

Occupation (for Individual)

Land Developer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 04 / 2018

Transaction ID : SA11AI.5700

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Chapman, Bradley, , ,

Mailing Address 3525 Del Mar Heights Rd.

Suite 1002

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NOV8 Consulting

Occupation (for Individual)

Principal

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 10 / 2018

Transaction ID : SA11AI.6065

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Clark, Jeffrey, , ,

Mailing Address 655 15th St. NW

City
Washington

State
DC

Zip Code
22079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kirkland & Ellis

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5751

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coghlan, Lezlee, , ,

Mailing Address 103 Makalau Drive

City
Bastrop

State
TX

Zip Code
78602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Texas

Occupation (for Individual)
Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5838

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DiGiulio, James, , ,

Mailing Address 8 Oak Ridge Road

City
Woodland Park

State
NJ

Zip Code
07424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rutgers University

Occupation (for Individual)
Compliance Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5727

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

5500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 47
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DiGiulio, James, , ,

Mailing Address 8 Oak Ridge Road

City

Woodland Park

State

NJ

Zip Code

07424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Rutgers University

Occupation (for Individual)

Compliance Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5728

Amount of Each Receipt this Period

12500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DiMaria, Rose, , ,

Mailing Address 240 Main Street

City

Little Falls

State

NJ

Zip Code

07424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested Per Best Effort

Occupation (for Individual)
Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2018

Transaction ID : SA11AI.5689

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dove, Jeff, , ,

Mailing Address 2461 Battery Hill Cr.

City

Woodbridge

State

VA

Zip Code

22191

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
InFrozen Inc

Occupation (for Individual)
Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5757

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

15250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fiol, Juan, , ,

Mailing Address 8210 SW 138 Avenue

City
Miami

State
FL

Zip Code
33183

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vision

Occupation (for Individual)
Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2018

Transaction ID : SA11AI.5715

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fiorello, Anthony, , ,

Mailing Address 305 Jefferson St.

City
Como

State
TX

Zip Code
75431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Anthony Fiorello LLC

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5729

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fiorello, Anthony, , ,

Mailing Address 305 Jefferson St.

City
Como

State
TX

Zip Code
75431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Anthony Fiorello LLC

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5730

Amount of Each Receipt this Period

8000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fiorello, Anthony, , ,

Mailing Address 305 Jefferson St.

City
ComoState
TXZip Code
75431FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Anthony Fiorello LLCOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018
Transaction ID : SA11AI.5731

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ford, Mardi, , ,

Mailing Address 2215 Gekeler Lane

City

La Grande

State

OR

Zip Code

97850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grande Ronde HospitalOccupation (for Individual)
Public Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018
Transaction ID : SA11AI.5732

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Freitas, Nick, , ,

Mailing Address 7330 Staples Mill Road

City

Richmond

State

VA

Zip Code

23188

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue LightOccupation (for Individual)
Defense/Intelligence/Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018
Transaction ID : SA11AI.5672

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

15500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Garcia, Leslie, ONeal, ,

Mailing Address 1175 Wenonah Ave

City
Oak Park

State
IL

Zip Code
60304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CTFC

Occupation (for Individual)
Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5867

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gifford, Sharon, , ,

Mailing Address 1699 Illinois St

City
Lake Charles

State
LA

Zip Code
70607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA11AI.5639

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Glenn, Dana, , ,

Mailing Address 15 W GLEBE RD C21

City
Alexandria

State
VA

Zip Code
22305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5847

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gregory, Boyd, , ,

Mailing Address 5146 Red Cedar Lane

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Conterra Ultra Broadband

Occupation (for Individual)
Data Network Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA11AI.5659

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gregory, Boyd, , ,

Mailing Address 5146 Red Cedar Lane

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Conterra Ultra Broadband

Occupation (for Individual)
Data Network Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2018

Transaction ID : SA11AI.5987

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gregory, Boyd, , ,

Mailing Address 5146 Red Cedar Lane

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Conterra Ultra Broadband

Occupation (for Individual)
Data Network Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2018

Transaction ID : SA11AI.6037

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gretskey, Ethan, , ,

Mailing Address 2929 Watson Blvd

City

Warner Robins

State

GA

Zip Code

31093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2018

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haberlein, Patricia, , ,

Mailing Address 4506 Hersman St., SE

City

Grand Rapids

State

MI

Zip Code

49546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
04 / 07 / 2018

Transaction ID : SA11AI.5910

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Haberlein, Patricia, , ,

Mailing Address 4506 Hersman St., SE

City

Grand Rapids

State

MI

Zip Code

49546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
06 / 22 / 2018

Transaction ID : SA11AI.6046

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Haller, Juli, , ,

Mailing Address 1111 Army Navy Drive
101

City
Arlington

State
VA

Zip Code
22202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5765

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hallinan, Rachel, , ,

Mailing Address 14522 Black Horse Ct.

City
Centerville

State
VA

Zip Code
20120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested Per Best Effort

Occupation (for Individual)
Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5766

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hassine, Brian, , ,

Mailing Address 1001 Brickell Bay Drive
#2700

City
Miami

State
FL

Zip Code
33131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

9000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2018

Transaction ID : SA11AI.5953

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hassine, Brian, , ,

Mailing Address 1001 Brickell Bay Drive
#2700

City
Miami

State
FL

Zip Code
33131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5735

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hassine, Brian, , ,

Mailing Address 1001 Brickell Bay Drive
#2700

City
Miami

State
FL

Zip Code
33131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2018

Transaction ID : SA11AI.6006

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hassine, Brian, , ,

Mailing Address 1001 Brickell Bay Drive
#2700

City
Miami

State
FL

Zip Code
33131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

21000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 24 / 2018

Transaction ID : SA11AI.6053

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heckman, Julie, , ,

Mailing Address 14225 Alta Oaks Dr.

City
Rockville

State
MD

Zip Code
20850

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Pyrotechnics

Occupation (for Individual)
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5675

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Janczewski, Jolanda, , ,

Mailing Address 10613 Daysailer Drive

City

Fairfax Station

State

VA

Zip Code

22019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CSS-DYNAMAC

Occupation (for Individual)
COB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5848

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jansen, Matt, , ,

Mailing Address 85 West Walnut Street

City

Yoe

State

PA

Zip Code

17313

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Revolution BioFuels

Occupation (for Individual)
Green Energy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Keaton, Kevin, , ,

Mailing Address 643 Cobblestone Drive

City
Delaware

State
OH

Zip Code
43015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SEA LIMITED

Occupation (for Individual)
Senior Fire Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA11AI.5982

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Keaton, Kevin, , ,

Mailing Address 643 Cobblestone Drive

City
Delaware

State
OH

Zip Code
43015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SEA LIMITED

Occupation (for Individual)
Senior Fire Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2018

Transaction ID : SA11AI.6032

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lewis, Mose, , ,

Mailing Address 4200 39th St. N

City
Arlington

State
VA

Zip Code
22207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KC Tax & Accounting

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5772

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

600.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lindemann, Jane, , ,

Mailing Address 10417 Lake Ridge Dr.

City
Oakton

State
VA

Zip Code
22124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mass, Marion, , ,

Mailing Address 100 Stone Creek Lane

City

Perkasie

State
PA

Zip Code
18944

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Childrens Hospital Philly

Occupation (for Individual)

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5774

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mayes, Christine, , ,

Mailing Address 34144 North Las Estrellas Lane

City

Queen Creek

State
AZ

Zip Code
85142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2018

Transaction ID : SA11AI.5934

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mayes, Christine, , ,

Mailing Address 34144 North Las Estrellas Lane

City

Queen Creek

State

AZ

Zip Code

85142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 18 / 2018

Transaction ID : SA11AI.5986

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mayes, Christine, , ,

Mailing Address 34144 North Las Estrellas Lane

City

Queen Creek

State

AZ

Zip Code

85142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Info Requested Per Best Effort

Occupation (for Individual)

Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 18 / 2018

Transaction ID : SA11AI.6035

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McGriff, Shari, , ,

Mailing Address 4383 Song Sparrow Dr.

City

Middleburg

State

FL

Zip Code

32068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Oral Roberts University

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 29 / 2018

Transaction ID : SA11AI.5650

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McGriff, Shari, , ,

Mailing Address 4383 Song Sparrow Dr.

City
Middleburg

State
FL

Zip Code
32068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oral Roberts University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2018

Transaction ID : SA11AI.5905

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Montfort, James, , , III

Mailing Address 106 Hamilton Road

City

Potomac Falls

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Americans for Constit. Law

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5775

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morrison, Mairi, , ,

Mailing Address 10707 Shelley Ct.

City

Garrett Park

State

MD

Zip Code

20896

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested Per Best Effort

Occupation (for Individual)
Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5736

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mosbacher, Michelle, , ,

Mailing Address 3262 Westheimer R.
#654

City
Houston

State
TX

Zip Code
77098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Fundraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murphy, Brian, , ,

Mailing Address 7767 Trevino Lane

City

Falls Church

State

VA

Zip Code

22043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11AI.5805

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pillow, James, , ,

Mailing Address 10392 E. Rose Glen Dr.

City

Claremore

State

OK

Zip Code

74019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5780

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rae, Brenda, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 21 / 2018 Transaction ID : SA11AI.5940	
Mailing Address 15221 North 44th Street			Amount of Each Receipt this Period 100.00	
City Phoenix	State AZ	Zip Code 85032	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 325.00	
Name of Employer (for Individual) BEAUTY BY BRENDA RAE			Occupation (for Individual) RN Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rae, Brenda, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 21 / 2018 Transaction ID : SA11AI.5993	
Mailing Address 15221 North 44th Street			Amount of Each Receipt this Period 100.00	
City Phoenix	State AZ	Zip Code 85032	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 425.00	
Name of Employer (for Individual) BEAUTY BY BRENDA RAE			Occupation (for Individual) RN Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rae, Brenda, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2018 Transaction ID : SA11AI.6042	
Mailing Address 15221 North 44th Street			Amount of Each Receipt this Period 100.00	
City Phoenix	State AZ	Zip Code 85032	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 525.00	
Name of Employer (for Individual) BEAUTY BY BRENDA RAE			Occupation (for Individual) RN Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
SUBTOTAL of Receipts This Page (optional).....			300.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 47
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ridge, Eric, , ,

Mailing Address 14221 Nobel Rock Ct.

City
El PasoState
TXZip Code
79938FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested Per Best EffortOccupation (for Individual)
Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : SA11AI.5869

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rigby, Charles, , ,

Mailing Address 219 North Locust Point Rd.

City

Mechanicsburg

State

PA

Zip Code

17050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2018

Transaction ID : SA11AI.5665

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rivera, James, , Dr.,

Mailing Address 14120A Lee Hwy

City

Centreville

State

VA

Zip Code

20122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : SA11AI.5782

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Robinson, Melanie, , ,

Mailing Address 944 Hardy Circle

City
Dallas

State
GA

Zip Code
30157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lockheed Martin

Occupation (for Individual)
Dispatcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5679

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Robinson, Melanie, , ,

Mailing Address 944 Hardy Circle

City
Dallas

State
GA

Zip Code
30157

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lockheed Martin

Occupation (for Individual)
Dispatcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5870

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Saba, Christine, , , MD

Mailing Address 106 Treehaven St.

City
Gaithersburg

State
MD

Zip Code
20878

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SABA Pediatric Medicine

Occupation (for Individual)
Pediatrican

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2018

Transaction ID : SA11AI.5738

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

565.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sayer, Poetry, , ,

Mailing Address P.O. Box 1071

City
McLean

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Deloitte & Touche

Occupation (for Individual)
Tax Senior

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5783

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shannon, Stephanie, , ,

Mailing Address PO Box 156

City

Newport News

State

VA

Zip Code

23607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested Per Best Effort

Occupation (for Individual)
Info Requested Per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2018

Transaction ID : SA11AI.5815

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Soucy, Francis, , ,

Mailing Address 17 Harrison Dr.

City

Wolcott

State

CT

Zip Code

06716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOD

Occupation (for Individual)
Contract Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2018

Transaction ID : SA11AI.5714

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spinelli, Lia, , ,

Mailing Address 2515 Marina Bay Dr. #209

City

Fort Lauderdale

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hargrove Custom Yachts

Occupation (for Individual)

Brokerage and Service Coordinator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 23 / 2018

Transaction ID : SA11AI.6004

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spinelli, Lia, , ,

Mailing Address 2515 Marina Bay Dr. #209

City

Fort Lauderdale

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hargrove Custom Yachts

Occupation (for Individual)

Brokerage and Service Coordinator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2018

Transaction ID : SA11AI.6052

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stallman, DeLois, , ,

Mailing Address 305 Chinquapin Orch

City

Yorktown

State

VA

Zip Code

23693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 09 / 2018

Transaction ID : SA11AI.5816

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stivaly, Elizabeth, , ,

Mailing Address 50 Muller Place

City
Little Falls

State
NJ

Zip Code
07424

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Liz Stivaly Jewlery

Occupation (for Individual)

Jewlery Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5682

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thorne, Della, , ,

Mailing Address 39 Rosewood Rd.

City
Casco

State
ME

Zip Code
40150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Nail Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.5880

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thorne, Della, , ,

Mailing Address 39 Rosewood Rd.

City
Casco

State
ME

Zip Code
40150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Nail Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2018

Transaction ID : SA11AI.5969

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

350.00

TOTAL This Period (last page this line number only).....▶

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thorne, Della, , ,

Mailing Address 39 Rosewood Rd.

City
Casco

State
ME

Zip Code
40150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Nail Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2018

Transaction ID : SA11AI.6020

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Unger, Katherine, , ,

Mailing Address 4809 Upton St. NW

City
Washington

State
DC

Zip Code
20016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York and Company

Occupation (for Individual)
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2018

Transaction ID : SA11AI.6070

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ventura, Diane, , ,

Mailing Address 121 Grosvenor Avenue

City
Butler

State
PA

Zip Code
16001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Info Requested per Best Effort

Occupation (for Individual)
Info Requested per Best Effort

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2018

Transaction ID : SA11AI.5788

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wilcox, Jennifer, , ,

Mailing Address 29426 Via Napoli

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Coast Community College Dist.

Occupation (for Individual)

Instructor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2018

Transaction ID : SA11AI.5668

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wilcox, Jennifer, , ,

Mailing Address 29426 Via Napoli

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Coast Community College Dist.

Occupation (for Individual)

Instructor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 02 / 2018

Transaction ID : SA11AI.5685

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilcox, Jennifer, , ,

Mailing Address 29426 Via Napoli

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Coast Community College Dist.

Occupation (for Individual)

Instructor

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2018

Transaction ID : SA11AI.5902

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Woods, Richard, , ,

Mailing Address 776 Wagon Wheel Rd.

City
Greenville

State
IL

Zip Code
62246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WOODS BASEMENT SYSTEMS, INC

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2018

Transaction ID : SA11AI.5991

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Woods, Richard, , ,

Mailing Address 776 Wagon Wheel Rd.

City
Greenville

State
IL

Zip Code
62246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WOODS BASEMENT SYSTEMS, INC

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2018

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

82895.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Adorama Camera, Inc.

Mailing Address 42 West 18th Street

City
New YorkState
NYZip Code
10011Purpose of Disbursement
Office Equipment-Mevo Camera w/battery pack and tripod

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5331

Amount of Each Disbursement this Period

499.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
Travel - Adam Gingrich for Miami Event

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5132

Amount of Each Disbursement this Period

676.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
Travel airline baggage fee for Karen Giorno for DC event

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5163

Amount of Each Disbursement this Period

61.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1237.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 38 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City
Fort WorthState
TXZip Code
76155

Purpose of Disbursement

Airfare for Karen Giorno for DC event (Arrival fare)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5164

Amount of Each Disbursement this Period

264.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City
Fort WorthState
TXZip Code
76155

Purpose of Disbursement

Airfare for Karen Giorno for DC event (return ticket)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5204

Amount of Each Disbursement this Period

295.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City
Fort WorthState
TXZip Code
76155

Purpose of Disbursement

Airline baggage fee for Karen Giorno for DC event return flight

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5205

Amount of Each Disbursement this Period

34.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

594.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Chilcote, Jennifer, , ,

Mailing Address 1001 Brickell Bay Drive, Suite 270

City
MiamiState
FLZip Code
33131Purpose of Disbursement
Communications Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	8			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5559**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office Expense for Virtual Office and Mail Forwarding

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5133**

Amount of Each Disbursement this Period

16.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office Expense for 1001 Brickell Bay, Miami, Florida, Virtual Office and Mail
services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	2			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5140**

Amount of Each Disbursement this Period

139.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1155.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 40 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office Expense for 1001 Brickell Bay Virtual Office and Mail Services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5145

Amount of Each Disbursement this Period

15.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office expense for virtual office and mailing expenses

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5184

Amount of Each Disbursement this Period

139.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office expense for virtual office and mailing expenses

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	5			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5202

Amount of Each Disbursement this Period

12.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

166.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 41 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office expense for virtual office and mailing expenses

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5198

Amount of Each Disbursement this Period

139.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Davinci Virtual OfficeMailing Address 2150 South 1300 East, Suite 200
#200City
Salt LakeState
UTZip Code
84106Purpose of Disbursement
Office expense for virtual office space and mail expenses

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	2			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5196

Amount of Each Disbursement this Period

18.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354Purpose of Disbursement
Travel- Airfare for Diamond & Silk plus Security for DC event (Return trip)

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.5151

Amount of Each Disbursement this Period

434.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

591.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354

Purpose of Disbursement

Travel- Airfare for Diamond & Silk plus security for DC event (Return ticket)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5152

Amount of Each Disbursement this Period

434.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354

Purpose of Disbursement

Travel- Airfare for Diamond & Silk plus security for DC event (Return trip)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5153

Amount of Each Disbursement this Period

434.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354

Purpose of Disbursement

Travel- Airfare for Diamond & Silk plus security for DC event (Arrival fare)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5154

Amount of Each Disbursement this Period

283.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1152.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354

Purpose of Disbursement

Travel- Airfare for Diamond & Silk plus Security for DC event (Arrival fare)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5155

Amount of Each Disbursement this Period

283.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd.

City
AtlantaState
GAZip Code
30354

Purpose of Disbursement

Travel- Airfare for Diamond & Silk plus security for DC event (Arrival fare)

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5156

Amount of Each Disbursement this Period

283.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address One Hacker Way

City
MenloState
CAZip Code
94205

Purpose of Disbursement

Internet Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.5166

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

816.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Facebook

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3			2	0	1	8		

Mailing Address One Hacker Way

City
MenloState
CAZip Code
94205Purpose of Disbursement
Internet Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.5201

Amount of Each Disbursement this Period

117.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hyatt Place Hotel

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	0			2	0	1	8		

Mailing Address 91 SW 18th Avenue

City
Dania BeachState
FLZip Code
33004Purpose of Disbursement
Lodging for Adam Gingrich for Miami Event

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.5138

Amount of Each Disbursement this Period

514.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NATIONBUILDER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	1	8		

Mailing Address 520 S. Grand Avenue

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
Online ServicesCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.5550

Amount of Each Disbursement this Period

1290.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1922.69

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. NATIONBUILDER

Mailing Address 520 S. Grand Avenue

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
Online Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5551**

Amount of Each Disbursement this Period

1290.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NATIONBUILDER

Mailing Address 520 S. Grand Avenue

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
Online Services

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	8			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5553**

Amount of Each Disbursement this Period

1290.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PayPal

Mailing Address 2211 North First Street

City
San JoseState
CAZip Code
95131Purpose of Disbursement
Credit Card Processing

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5556**

Amount of Each Disbursement this Period

303.83

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2884.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. PayPal

Mailing Address 2211 North First Street

City
San JoseState
CAZip Code
95131Purpose of Disbursement
Credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5558**

Amount of Each Disbursement this Period

14.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Platinum Enterprises LLC

Mailing Address 16 Furier Street

City
TotowaState
NJZip Code
07512Purpose of Disbursement
Event Consulting fees for 5/9/18 Event at Trump International Hotel featuring
Sara Palin

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	2		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5141**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Platinum Enterprises LLC

Mailing Address 16 Furier Street

City
TotowaState
NJZip Code
07512Purpose of Disbursement
Event Consulting fees for DC event at Trump International Hotel /Sara Palin
event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				0	9		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5179**

Amount of Each Disbursement this Period

30000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

45014.18

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 47 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Stripe

Mailing Address 185 Berry St #550

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5557**

Amount of Each Disbursement this Period

2294.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Trump International Hotel

Mailing Address 1100 Pennsylvania Avenue, NW

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Meals for MAGA Coalition Volunteer Dinner post-DC event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5181**

Amount of Each Disbursement this Period

557.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trump International Hotel

Mailing Address 1100 Pennsylvania Avenue, NW

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Meals - DC event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.5185**

Amount of Each Disbursement this Period

226.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3078.40

58615.52